



FACT SHEET

USAID/PHCPI Work in Kurdistan

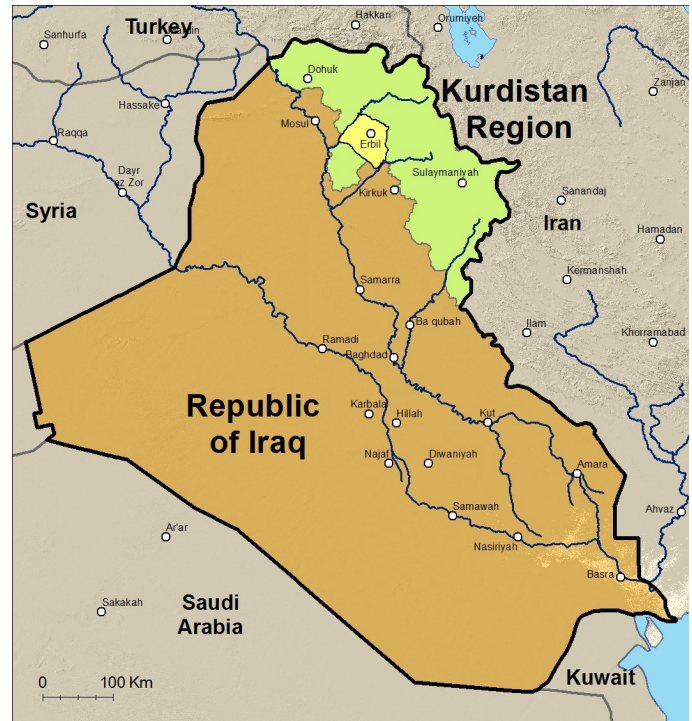
Since March of 2011, USAID's Primary Health Care Project (PHCPI) has been working in the Kurdistan Regional Government (KRG) to improve primary health care, and reduce maternal and children mortality rates. PHCPI is working to strengthen primary health care through support for Primary Health Care Centers (PHCCs) by training medical and administrative staff, upgrading facilities, providing new equipment and medications, and implementing standardized guidelines for medical procedures and clinic management.

To meet Millennium Development Goals 4 & 5, which aim for a reduction in child mortality and improvement in maternal health by 2015, the program is supporting community networks such as Traditional Birth Attendants (TBAs) and conducting public education programs to educate women about the warning signs of health risks during pregnancy. TBAs have been trained to recognize serious maternal, neonatal and child health problems, and have become familiar with procedures for referring these cases to the nearest clinic.

Model Clinics

PHCPI has supported the development of six Model Clinics in Duhok, Erbil and Sulaimaniyah. Only one is pending certification, Shaheed Nafea Akrayee PHCC, due to ongoing physical rehabilitation. A certified Model Clinic meets a minimum set of common standards for equipment, facilities, personnel and procedures. These standards are designed to be readily applied to other health centers, making it straightforward to continue implementation after the completion of the project. Model Clinics support 51 smaller health care centers (often called sub-clinics) by offering more sophisticated medical and laboratory procedures that can be accessed by patients through a referral system. Model Clinics in the KRG are supported by 3 full-time PHCPI coordinators who help ensure that they are meeting standards and operating successfully.

The project also supports 57 PHCCs (one of which has been excluded in Duhok due to airport construction) in the KRG by supporting improved patient recordkeeping, and



PHCPI supports activities in all three provinces in the Kurdistan Region of Iraq.

assisting Quality Improvement Teams comprised of staff from local health centers, Districts of Health and the Kurdistan Ministry of Health (KMoH) monitor and progress the quality of patient care. These clinics are also supported by the PHCPI coordinators.

The project educates personnel working at PHCCs by conducting trainings for trainers based in the KMoH, who then train staff; often in the clinics themselves. Training is not only focused on medical procedures, but also covers administration, equipment maintenance and community relations.

- ♦ PHCPI has trained 3,293 participants from the KRG. Of these 3,293, 1,259 were from Erbil, 984 from Duhok, and 1,050 from Sulaimaniyah.
- ♦ PHCPI trained 1,795 service providers from KRG clinics and 1,498 from the Directorates of Health (DoHs).
- ♦ From the six Model Clinics, 406 staff were trained.

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A PHCPI staff member delivers IEC materials to IDPs in Duhok

- ◆ 179 training events were held in KRG - 95 in Erbil, 38 in Duhok, and 46 in Sulaimaniyah.
- ◆ PHCPI conducted 42 on-the-job training activities within KRG clinics.
- ◆ A total of 255 participants were trained as Trainers of Trainers - 108 from Erbil, 67 from Duhok, and 80 from Sulaimaniyah - in order to provide continued training and ensure sustainability.

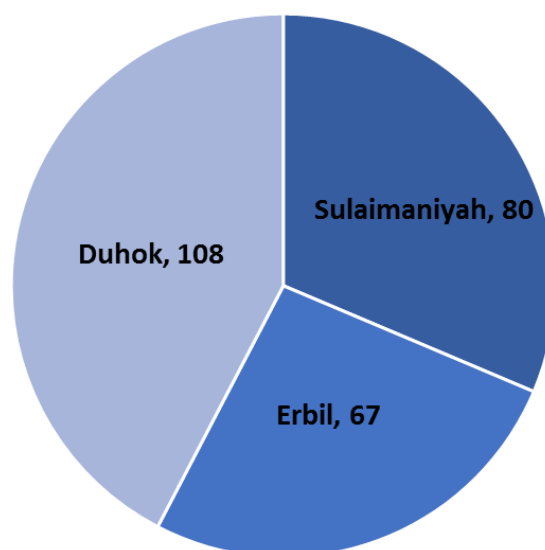
Program Results in the KRG to Date

- ◆ PHCPI has carried out a number of activities to date with successful results. Some of these include:
- ◆ Provided essential equipment and continued staff education to six Model Clinics to help them meet the required standards.
- ◆ Developed 36 PHC clinical guidelines and associated curricula and provided training in subjects such as Emergency Obstetrics and Newborn Care, Antenatal Care Guidelines, Integrated Management of Childhood Illnesses for Nurses and for Physicians, Communicable Diseases and Control, Infection Prevention and Waste Management, and Poly Trauma, among others.
- ◆ Established 56 LHCs in cooperation with city officials and health authorities in Erbil, Duhok, and Sulaimaniyah.
- ◆ In partnership with the General Directorate of Health Affairs, PHCPI held the first national conference in Kurdistan on Health Promotion in order to strengthen

community partnership and implement behavior change, "Building Partnerships to Promote Health and Create a Healthy Community."

- ◆ Finalized the printing and production of Essential Drugs List guidelines and initiated training for use by PHCCs.
- ◆ Facilitated the adoption of an updated medical record system in 56 PHCCs. K-MOH is in the process of printing and adopting this system at all KRG clinics.
- ◆ Established Quality Improvement (QI) teams in 56 PHCCs and trained staff on QI and supportive supervision techniques.
- ◆ Conducted rollout and on-the-job training courses for 1,795 service providers from KRG clinics and 1,498 from the DOHs on Community Health Partnership (CHP), Standard Operating Procedures (SOP), the Management Handbook, Medical Records, Referral System, Supportive Supervision, and other clinical guidelines.
- ◆ Established 255 trainers, 108 in Erbil, 67 in Duhok and 80 in Sulaimaniyah, who will continue PHCPI training activities for improved health systems management and for a wide range of continuing medical education.
- ◆ For each PHCPI-supported PHCC, the project provided a package containing 73-75 medical guidelines that were prepared and printed by PHCPI and approved by the KMoH. Erbil received 1,225 copies, Sulaimaniyah 1,275 copies and Duhok 876 copies. The package contains both hard and soft copies of all materials as well availability in three languages – English, Arabic

Trainers of Trainers in KRG



and Kurdish. The KMoH assisted PHCPI in the translation of the Kurdish materials.

- ♦ The KMoH has recognized PHCPI's continued efforts to reduce maternal, neonatal, and infant mortality through implementation of a BCC and community mobilization campaign in August 2014, to reach women of reproductive age and vulnerable groups in IDP camps to emphasize the importance of early vaccinations, breast feeding and good nutrition to ensure healthy mothers and babies.

Sustainability beyond PHCPI

The project is working to ensure the sustainability of activities as the K-MOH prepares to take over implementation. PHCPI has led six PHCCs to achieve Model Clinic status by undertaking physical upgrades, providing extensive training to personnel, supporting the development of community partnerships, supplying improved medical equipment and conducting regular monitoring. The project finalized the formal adoption of model clinic criteria by the K-MOH on September 25, 2014.

Public education and outreach campaigns have been conducted in partnership with LHCs to raise awareness for common health concerns, and to promote the Local Health Committee Partnership Plan and Behavior Change Communication Strategy. Extensive efforts were made towards promoting the National Statement of Patients' Rights and PHCC services.

Efforts to address maternal and neonatal mortality have now increased thanks to the Information, Education, and Communication (IEC) materials and BCC campaign through print and media outreach. A public education campaign was launched in July/August 2014 in partnership with the K-MOH to raise awareness of maternal and neonatal health. TBAs in the KRG have been trained and issued birthing kits containing equipment used to prevent maternal and neonatal mortality. A 'refresher' course for K-MOH trainers has taken place to ensure PHCPI leaves a pool of educators who will continue education and information dissemination for health care personnel and facilities through the KRG.



Kurdish PHCPI BCC TV Spots focused on diarrhea prevention and treatment, health care for pregnant women, and the importance of breastfeeding. These were aired on Kurdish and Iraqi TV stations and broadcast on PHCC waiting room TVs. In addition to the TV spots, Kurdish PHCPI awareness materials for measles, polio and cholera were distributed.